

This Form Based on PTO/SB/21

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/606,939
Filing Date	June 27, 2003
First Named Inventor	AOKI et al.
Group Art Unit	2817
Examiner Name	NGUYEN
Attorney Docket Number	11-166

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request of Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

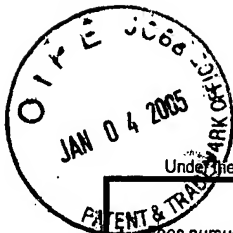
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual name	Robert L. Scott, II (Reg. No. 43,102) Posz & Bethards, PLC
Signature	
Date	January 4, 2005

CERTIFICATE OF FIRST CLASS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage on February 4, 2004 as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Type or printed name	
Signature	



IFW\$

PTO/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0651-0032
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Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/606,939
		Filing Date	June 27, 2003
		First Named Inventor	AOKI et al.
		Examiner Name	NGUYEN
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Art Unit	2817
TOTAL AMOUNT OF PAYMENT	(\$) 200	Attorney Docket No.	11-166

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-1147 Deposit Account Name: Posz & Bethards, PLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charges fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	18	9
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	88	44
Multiple dependent claims	300	150

Total Claims 14 - 20 or HP = x \$50 = **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims 4 - 3 or HP = 1 x \$200 = \$200 **Fee Paid (\$)**

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (\$ for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u>\$0</u>

4. OTHER FEE(S)

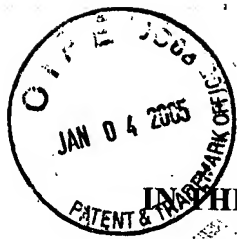
Non-English Specification, \$130 fee (no small entity discount)

Other: **Fees Paid (\$)**

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	43,102
Name (Print/Type)	Robert L. Scott, II	Telephone	(703) 707-9110
		Date	January 4, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: AOKI, et al.

Serial No.: 10/606,939

Filed: June 27, 2003

Title: OPERATIONAL AMPLIFYING
CIRCUIT AND PUSH PULL CIRCUIT

Atty. Dkt.: 11-166

Art Unit: 2817

Examiner: Patricia T. Nguyen

Mail Stop: Amendment

Commissioner for Patents

U.S. Patent and Trademark Office

220 20th Street South

Crystal Plaza Two, Lobby, Room 1B03

Arlington, VA 22202

Date: January 4, 2005

AMENDMENT UNDER 37 CFR 1.111

Sir:

In response to the office action mailed October 5, 2004, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks begin on page 9 of this paper.

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